

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Hilton Newark

Mailing Address 1170 Spring St

Date of Disbursement

M M	D D	Y Y Y Y
07	29	2015

City	State	Zip Code
Elizabeth	NJ	07201-2114

Amount of Each Disbursement this Period

188.79

Purpose of Disbursement
TravelCategory/
Type

Transaction ID : VN7AV9V8837

[MEMO ITEM]

*

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Hilton Newark

Mailing Address 1170 Spring St

Date of Disbursement

M M	D D	Y Y Y Y
07	29	2015

City	State	Zip Code
Elizabeth	NJ	07201-2114

Amount of Each Disbursement this Period

188.79

Purpose of Disbursement
TravelCategory/
Type

Transaction ID : VN7AV9V8861

[MEMO ITEM]

*

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Jax Cafe

Mailing Address 1928 University Ave NE

Date of Disbursement

M M	D D	Y Y Y Y
07	29	2015

City	State	Zip Code
Minneapolis	MN	55418-4397

Amount of Each Disbursement this Period

252.83

Purpose of Disbursement
Event Expense - Food & BeveragesCategory/
Type

Transaction ID : VN7AV9V8853

[MEMO ITEM]

*

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00